

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011556

FILED
Apr 21, 2009
Secretary of State

Entity Name: THE PELICAN ISLAND GARDEN CLUB OF SEBASTIAN, INC.

Current Principal Place of Business:

511 CROSS CREEK CIR
SEBASTIAN, FL 329588312

New Principal Place of Business:

Current Mailing Address:

511 CROSS CREEK CIR
SEBASTIAN, FL 329588312

New Mailing Address:

FEI Number: 65-0076146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIEL, SHEILA
511 CROSS CREEK CIR
SEBASTIAN, FL 329588312 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIQUELON, MARGARET
Address: 933 STREAMLET AVE
City-St-Zip: SEBASTIAN, FL

Title: V () Delete
Name: ZUKOWSKI, PATRICIA
Address: 2541 ERIN WAY
City-St-Zip: SEBASTIAN, FL

Title: S () Delete
Name: SHARP, GAIL
Address: 133 MELTON AVE
City-St-Zip: SEBASTIAN, FL

Title: S () Delete
Name: JOHNS, EDITH
Address: 1316 SHORELINE CIR
City-St-Zip: SEBASTIAN, FL

Title: T () Delete
Name: DANIEL, SHEILA
Address: 511 CROSS CREEK CIR
City-St-Zip: SEBASTIAN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHARP, GAIL
Address: 133 MELTON AVE
City-St-Zip: SEBASTIAN, FL 32958 US

Title: V (X) Change () Addition
Name: LENOFF, KENNETH
Address: 501 GLEN COVE STREET
City-St-Zip: SEBASTIAN, FL 32958 US

Title: S (X) Change () Addition
Name: O'BRIEN, GEORGIANA
Address: 293 CAVALIER STREET
City-St-Zip: PALM BAY, FL 32909 US

Title: S (X) Change () Addition
Name: JOHNS, EDITH
Address: 1316 SHORELINE CIR
City-St-Zip: SEBASTIAN, FL 32958 US

Title: T (X) Change () Addition
Name: DANIEL, SHEILA
Address: 511 CROSS CREEK CIR
City-St-Zip: SEBASTIAN, FL 32958 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHEILA M. DANIEL

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date